

215	344
Class	Subclass
ISSUE CLASSIFICATION	

**FILED UNDER 35 U.S.C. 371**

PATENT NUMBER

## U.S. UTILITY Patent Application

<p><i>pa</i></p> <p>O.I.P.E.</p>	<p>PATENT DATE</p>
<p>SCANNED <i>740</i> O.A. <i>50</i></p>	

APPLICATION NO. 09/936817	CONT/PRIOR D F	CLASS 215	SUBCLASS 344	ART UNIT 3727	EXAMINER <del>CHENHUISE</del> N90
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## APPLICANTS

Rodney Druitt  
David Foster  
Riginald Denny

**TITLE**

Closure with seal member

PTO-2040  
12/89

ISSUING CLASSIFICATION									
ORIGINAL			CROSS REFERENCE(S)						
CLASS		SUBCLASS	CLASS	SUBCLASS (ONE SUBCLASS PER BLOCK)					
215		344	215	252	diag.1				
INTERNATIONAL CLASSIFICATION									
B65D		531.00							

☐ Continued on Issue Slip Inside File Jacket

<input type="checkbox"/> <b>TERMINAL DISCLAIMER</b>	<b>DRAWINGS</b>			<b>CLAIMS ALLOWED</b>				
	Sheets Dwg.  3	Figs. Dwg.  3	Print Fig.  2	Total Claims  23	Print Claim for O.G.  1			
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.	_____ (Assistant Examiner) (Date)			<b>NOTICE OF ALLOWANCE MAILED</b>				
	<input type="checkbox"/> The term of this patent shall not extend beyond the expiration date of U.S. Patent. No. _____ _____ _____			<b>ISSUE FEE</b> <table border="1"> <tr> <td>Amount Due</td> <td>Date Paid</td> </tr> <tr> <td> </td> <td> </td> </tr> </table>		Amount Due	Date Paid	
Amount Due	Date Paid							
<input type="checkbox"/> The terminal _____ months of this patent have been disclaimed.	_____ (Legal Instruments Examiner) (Date)			<b>ISSUE BATCH NUMBER</b>				


**WARNING:**

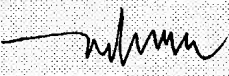
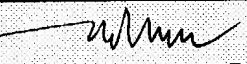
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<b>Issue Classification</b> 	Application No.	Applicant(s)	
	09/936,817	DRUITT ET AL.	
	Examiner	Art Unit	
	LIEN TM NGO	3727	

ISSUE CLASSIFICATION									
ORIGINAL		CLASS	CROSS REFERENCE(S)						
CLASS	SUBCLASS		SUBCLASS (ONE SUBCLASS PER BLOCK)						
215	394	115	252	dig. 1					
INTERNATIONAL CLASSIFICATION									
B65D	53/00								
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(Assistant Examiner) (Date)		 4EN DGO 3/8/04 (Primary Examiner) (Date)			Total Claims Allowed: 23				
 3/2/04 (Legal Instruments Examiner) (Date)					O.G. Print Claim(s) 1		O.G. Print Fig. 2		

<input type="checkbox"/> Claims renumbered in the same order as presented by applicant		<input type="checkbox"/> CPA		<input type="checkbox"/> T.D.		<input type="checkbox"/> R.1.47	
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